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PTO/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. First Inventor

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No.

	TION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Westignton DC 20221		
	erning utility patent application contents.	Washington, DC 20231		
1. Submit an original and a Applicant claims s See 37 CFR 1.27.	ر می	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. Specification (preferred arrangement	[Total Pages 49]	a. Computer Readable Form (CRF)		
- Descriptive title - Cross Reference		 b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or 		
	quence listing, a table,	ii. paper		
or a computer p - Background of	rogram listing appendix the Invention	c. Statements verifying identity of above copies		
- Brief Summary - Brief Descriptio	of the Invention n of the Drawings (<i>if filed</i>)	ACCOMPANYING APPLICATION PARTS		
- Detailed Descri		Assignment Papers (cover sheet & document(s))		
- Claim(s) - Abstract of the	Disdosure	10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney		
4. Drawing(s) (35 U	.S.C. 113) [Total Sheets]	11 English Translation Document (if applicable)		
5. Oath or Declaration	[Total Pages]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations		
a. Newly execu	uted (original or copy)	13. Preliminary Amendment		
b. Copy from a (for continua	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
Signed sta	ION OF INVENTOR(S) tement attached deleting inventor(s)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)		
	he prior application, see 37 CFR and 1.33(b).	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.		
6 Application Data	Sheet. See 37 CFR 1.76	17. Other:		
	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:			
Continuation	Divisional Continuation-in-part (CIP)	of prior application No.:/		
Prior application information:	Examiner	Group Art Unit:		
Box 5b, is considered a part of	the disclosure of the accompanying continual	prior application, from which an oath or declaration is supplied under tion or divisional application and is hereby incorporated by reference. Intly omitted from the submitted application parts.		
	19. CORRESPONDE			
Customer Number or Bar Co	ode Label (Insent@ustomerNo.crAlizenbaro	or Correspondence address below		
Name	Donald L. Bark			
	6 Williams burg C	likele		
Address	0			
City	Evanston :	State Illinois Zip Code 60203		
Country	USA Telep	phone (847)(079-1/46 Fax		
Name (Print/Type)		Registration No. (Attorney/Agent)		
Signature		Date		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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for FY 2002

Patent fees are subject to annual revision.

Applicant daims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 7	14
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Complete if Kn wn				
Application Number				
Filing Date				
First Named Inventor				
Examiner Name				
Group Art Unit				
Attorney Docket No.	Barbeau 0302			

METHOD OF PAYMENT (check all that apply)	METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)			
Check Credit card Money Order None	Other None 3. ADDITIONAL FEES			
Deposit Account:	Large Entity	Small Entit	у.	
Deposit	Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	Fee Paid
Account Number	105 130	205 65	Surcharge - late filing fee or oath	
Deposit Account Name	127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	139 130	139 130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	147 2,520	147 2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application	112 920°	112 920°	Requesting publication of SIR prior to	
Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.			Examiner action	
FEE CALCULATION	113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
1. BASIC FILING FEE	115 110	215 55	Extension for reply within first month	
Large Entity Small Entity	116 400	216 200	Extension for reply within second month	
Fee Fee Fee Fee Description	117 920	217 460	Extension for reply within third month	
Code (\$) Code (\$) Fee Paid 101 740 201 370 Utility filing fee 370	118 1,440	218 720	Extension for reply within fourth month	
106 330 206 165 Design filing fee	128 1,960	228 980	Extension for reply within fifth month	
107 510 207 255 Plant filing fee	119 320	219 160	Notice of Appeal	
108 740 208 370 Reissue filing fee	120 320	220 160	Filing a brief in support of an appeal	
114 160 214 80 Provisional filing fee	121 280	221 140	Request for oral hearing	
SUBTOTAL (1) (\$) 370	138 1,510	138 1,510	Petition to institute a public use proceeding	
., (<u>1,/, 9, 1, 9</u>	140 110	240 55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	141 1,280	241 640	Petition to revive - unintentional	
Extra Claims below Fee Paid Total Claims 38 -20** = 18 x 768 = 168		242 640 243 230	Utility issue fee (or reissue)	
Total Claims Independent	143 460 144 620	243 230	Design issue fee Plant issue fee	
Claims Multiple Dependent 140 = 140	122 130	122 130	Petitions to the Commissioner	
manapa soperiosii.	123 50	123 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	126 180	126 180	Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40	581 40	Recording each patent assignment per	
103 18 203 9 Claims in excess of 20	301 40	301 40	property (times number of properties)	
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid	146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	
104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 ** Reissue independent claims over original patent	149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	179 740	279 370	Request for Continued Examination (RCE)	
and over original patent	169 900	169 900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 344	Other fee (s	pecify)		
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3)				

SUBMITTED BY		Complete (il applicable)	
Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone	
Signature		Date	

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